SUBNET: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

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BAYFIELD COUNTY, WISCONSIN Dane Sump Received E 1 W E 100 APPLICATION FOR PERMIT 28

Permit#: Refund: Date: Amount Paid #25P-9-1 11-9-15

Base #

Bayfield Co. Zoning Dept.

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department.

O NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.	TION UNTIL ALL	PERMITS HAV	E BEEN ISSUED TO A	(PPLICANT.							
TYPE OF PERMIT REQUESTED—  Owner's Name:	A-Galisan)	R CONTROL	SANI	Mailing Address:	<b>2</b>   3		<b>5</b> ′ 5	SPECIAL USE	□ B.O.A.	ele	DOTHER
7777				City/State/Zip:	City/State/Zip: いたSHのペン	3	16845			Cell Phone:	Cell Phone:
Contractor:	Z	D	<b>N</b> 1	Contractor Phone:	يو	Plumber:				Plumber Phone:	hone:
Authorized Agent: (Person Signing Application	on Signing Applic	ation on behalf	on behalf of Owner(s))	Agent Phone:		gent Mailing A	Agent Mailing Address (include City/State/Zip):	ate/Zip):		Written Al Attached	Written Authorization Attached ☐ Yes ☐ No
PROJECT LOCATION	legal Description		(Use Tax Statement)	PIN: (23 digits)			00 -176 -0708	Recorded Volume	d Document	: (i.e. PropertPage(s)	Recorded Document: (i.e. Property Ownership)  Volume
1/4,	1/4	Gov't Lot	Lot Lot(s)	CSM	Vol & Page 128446	Lot(s) No.	lo. Block(s) No.	Subdivision	Subdivision:		Press &
Section 17	, Township		N, Range S	W	Say 20	2		Lot Size		A	`
	☐ Is Property Creek or Land	/Land within dward side o	☐ Is Property/Land within 300 feet of River, Stream (incl. Intermittent)  Creek or Landward side of Floodplain? If yes—continue —▶	, Stream (	tream (incl. Intermittent)	Distance Structure	ructure is from Shoreline :	line : feet	Is Property in Floodplain Zone?		Are Wetlands Present?
Jaioreiano —	□ Is Property	/Land within	☐ Is Property/Land within 1000 feet of Lake, Pond or Flowage If yes—continue	e, Pond or Flowage If yescontinue	Flowage	Distance Structure	ructure is from Shoreline :	line : feet	X \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	5`g`	No.
X Non-Shoreland									1 	¥	
Value at Time of Completion * include donated time &	Project	<b>1</b>	# of Stories and/or basement	ent	Use	# of bedrooms	Sewe Is c	What Type of wer/Sanitary Sys	What Type of Sewer/Sanitary System Is on the property?		Water
	New Construction	ruction	- P - 1		Seasonal	ם פ	☐ Municipal/City	1 1	5		□ Çity
\$/00,000	Conversion Relocate (existing bldg)	disting bldg)	2-Story Basement	_ 2	Total Nound	3 2	Towns of the second of the se	sts) Specify	cify Type:	y Type: <b>DXA</b> A ted (min 200 gallon)	1)
	Property	ness on	☐ No Basement ☐ Foundation ☐	1 1		None	☐ Portable (w/service con	let	ontract)		
Existing Structure: (if permit being applied for is relevant to it)  Proposed Construction:	(if permit bein	g applied for	is relevant to it)	Len	Length: 36		Width: 26		H H	Height:	
Proposed Use				Prop	Proposed Structure	e		-	Dimensions	5	Square
	X -	Principal S Residence	Principal Structure (first structure on property) Residence (i.e. cabin, hunting shack, etc.)	structure i	on property) c, etc.)			<u> </u>	مسو	<u> </u>	936
Residential Use	m		with a Porch						××		
			with (2 <sup>nd</sup> ) Porch	ch					××	_	
			with (2 <sup>nd</sup> ) Deck	*				_	×		
Commercial Use	se .		with Attached Garage	Garage				_	×	_	
		Bunkhous	Bunkhouse w/ (☐ sanitary,	임	🗌 sleeping quarters, g	or □ cooking	cooking & food prep facilities)	)	×	_	
		Mobile Ho	l of	ed date) _			жения от применя положения по применя по при	-	×	- -	
☐ Municipal Use		Addition/Alteration	Addition/Alteration (specify)	cify)	Avvenue de minuteralemente en	Annahan territoria del territoria del territoria del territoria del territoria del territoria del territoria d			×		
Rec'd for Issuance		Accessory	∞	on/Altera	ation (specify)				×		
		Cassial III						_	< .	-	
		Conditiona	Conditional Use: (explain)						× :		
Secretarial Staff		Other: (explain)	olain)		10000			_	×	_	

I (we) declare that this application (including any am (are) responsible for the detail and accuracy may be a result of Bayfield County relying of the above described postering and any reasonable time. listed on the Deed  $\underline{\mathsf{All}}$  Owners must sign  $\underline{\mathsf{or}}$  letter(s) of authorization must accompany this application) FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES you companying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) you information I (we) an (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the ordinance or inspection. Franks

Address to send permit (If yo 5 n behalf of the alf of the Hub Sur gier

Authorized Agent:

(If ther

Date

Date

Copy of Tax Statement recently purchased the property send your Recorded Deed

Please complete (1) - (7) above (prior to continuing)

(8) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

Se	Se.	<u>ي</u>		Ş	Š	ξ.	Ş		Ş	က္		
Setback to Privy (Portable, Composting)	Setback to <b>Drain Field</b>	Setback to Septic Tank or Holding Tank		Setback from the East Lot Line	Setback from the West Lot Line	Setback from the <b>South</b> Lot Line	Setback from the North Lot Line		Setback from the Established Right-of-Way	Setback from the Centerline of Platted Road		Description
				4					ay			
	S	o V	Topological Control	788	006	100	COLOR COLOR	,		で (人)		Meas
Feet	Feet	Feet		Feet	Feet	Feet	Feet		Feet	Feet		Measurement
					A85						318 <u>8</u>	
		Setback to Well		Elevation of <b>Floodplain</b>	20% Slope Area on property	Setback from <b>Wetland</b>		Setback from the Bank or Bluff	Setback from the River, Stream, Creek	Setback from the Lake (ordinary high-water mark)		Description
-		100			Yes							Measuremen
		Feet		Feet	□ No	Feet		Feet	Feet	Feet		ment

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed

## 9 Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

	avit: U Hold For Fees: O	Hold For Affidavit: 📙	Hold For Sanitary: Hold For TBA:
Date of Approva			Signature of inspector:
Shorthay	Connection to Existing	1. Connecti	Computes in
**************************************	No they need to be attached.)	ons Attached? Ves No Tif N	Condition(s) Town, Committee or Board Conditions Attached? Yes No (If No they need to be attached.)
Date of Re-Inspection:	George Poses Murph	Inspected by \( \sum_{\alpha} \)	Date of Inspection: 11-6-15
Zoning District (RRS) Lakes Classification (RR)			Inspection Record:
Kes ONO	Were Property Lines Represented by Owner Was Property Surveyed	(Yes   No	Was Parcel Legally Created XYes □ No Was Proposed Building Site Delineated XYes □ No
** Constitution of the Con	Previously Granted by Variance (B.O.A.)  Uses ANO Case #:		Granted by Variance (B.O.A.)  (No Case #:
Affidavit Required	Mitigation Required □ Yes □ No Mitigation Attached □ Yes No	☐ Yes (Deed of Record) \	Is Parcel a Sub-Standard Lot □ Yes (Deed of Record) _ □ Yes (Fused/Contiguou Is Parcel in Common Ownership □ Yes (Fused/Contiguou Is Structure Non-Conforming □ Yes
		Permit Date: //_ 9	Permit #: 15-0441
	5011 4090 m JAP	Reason for Denial:	Permit Denied (Date):
sanitary Date: /- 99	32746 #OT DEGROOMS: 3 m	Sanitary Number:	Issuance Information (County Use Only)

SURMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: Bayfield County
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PO Box 58
Washburn, WI 54891
(715) 373-6138

T T BAYFIELIECOUNTY WISGENSIN 110V 04 2015 

Dafi md	Amount Paid:	Date:	Permit #:
	\$ 540 11-13-15	51-61-11	の声で、公

INSTRUCTIONS: No permits will be issued until all fees are paid.
Checks are made payable to: Bayfield County Zoning Departmen

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DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT

Bayfield Co. Zoning Dept.

	Section $28$ , Township $49$ N, Range $O\!\!\!/\!\!\!/$ W	SW 1/4, SW 1/4 Gov't Lot Lot(s)	PROJECT (V / Z () / Z = 1 - W - W - W - W - W - W - W - W - W -	アコン ごうごうけ アニア アー		Authorized Agent: (Person Signing Application on behalf of Owner(s))	Contractor: Self	33005 Westgate Rd.	Gary & Nancy Cholwek	TYPE OF PERMIT REQUESTED→ □ LAND USE □ SANITARY □ PRIVY □ CONDITIONAL USE □ SPECIAL USE
,	- W Town of: Bay VIEW	CSM Vol & Page	04-008-2-49-04-28-303-00-2000	CE) - INC		Agent Phone: Agent N	Contractor Phone: Plumber:	City/State/Zip: Washburn, Wi. SAR/	Mailing Address: City/State/Zip: City/State/Zip: Washburn, Wi. 59	VITARY 🗆 PRIVY 🗎 CONI
	<i>U</i>	Lot(s) No. Block(s) No.	903-000-2000			Agent Mailing Address (include City/State/Zip):	Ti .	Wi. SAR	Eity/State/Zip:  Line Shoura, L	DITIONAL USE 🛮 SPEC
	Lot Size	Subdivision:	Volume			tate/Zip):			W. 54891	
	Acreage		Page(5)	+: /i o Proposition	Attached  Ves No	Written Authorization	Plumber Phone:	Cell Phone:	Telephone: 715-373-2460	□ B.O.A. □ OTHER

				70,000	^ 2 2 2 2 2 3		Value at Time of Completion *include donated time & material	ย Non-Shoreland	×	☐ Shoreland —	
	Property	Run a Business on	Relocate (existing bldg)	☐ Conversion	■ Addition/Alteration	□ New Construction	Project			☐ Is Property/Land within 1000 feet of Lake, Pond or Flowage If yescontinue	☐ Is Property/Land within 300 feet of River, Stream (Incl. Intermittent)  Creek or Landward side of Floodplain? If yes—continue —▶
	□ Foundation	□ No Basement	☐ Basement	□ 2-Story	✓ 1-Story + Loft	□ 1-Story	# of Stories and/or basement			1 1000 feet of Lake, Por	1 300 feet of River, Stre
					Year Round	Seasonal	Üse			Pond or Flowage If yescontinue	if yescontinue
		□ None		3	□ 2		# of bedrooms			Distance Stru	Distance Stru
None	Compost Toilet	☐ Portable (w/service contract)	☐ Privy (Pit) or ☐ Vaulted (min 200 gallon)	I Sanitary (Exists) Specify Type: holden that	(New) Sanitary Speci	☐ Municipal/City	What Type of Sewer/Sanitary System Is on the property?			Distance Structure is from Shoreline :	Distance Structure is from Shoreline :
		ntract)	Ited (min 200 gallon)	ify Type: holden tank	fy Type:		oe of Y System operty?			Ves Ves	Is Property in A
			New Address of the Control of the Co		Well	□ City	Water			□ Yes	Are Wetlands

Secretarion of the I				Rec'd for Issuance	- Municipal ose				Commercial Use			***************************************	Z Residential Use				Proposed Use		Proposed Construction:	Existing Structure:					70,000			* include donated time & material
`	<u> </u>					9			Jse				Se			<b>5</b>			tion:	(if permit being applied for is relevant to it)		Property	Run a Business on	Relocate (existing bldg)	☐ Conversion	✓ Addition/Alteration	○ New Construction	
Other: (explain)	Conditional	pecial Use	Addition	Accessory E	Accessory E	Addition/A	Vlobile Hon	Bunkhouse							Residence (	Principal St				applied for i	annite control of the		Τ					
ain)	Conditional Use: (explain)	Special Use: (ekplan/ 5	" - connector	Accessory Building Addition/Alteration (specify)	Accessory Building (specify) /0X 20	teration (specify)	Mobile Home (manufactured date)	<b>Bunkhouse</b> w/ ( $\square$ sanitary, or $\square$ sleeping quarters, or $\square$ cooking & food prep facilities)	with Attached Garage	with (2 <sup>nd</sup> ) Deck	with a Deck	with (2 <sup>nd</sup> ) Porch	with a Porch	with Loft	Residence (i.e. cabin, hunting shack, etc.)	Principal Structure (first structure on property)				s relevant to It)		Foundation	□ No Basement	Basement	□ 2-Story	2 1-Story + Loft	□ 1-Story	and/or basement
		SIX AC	to	Iteration (specify)	POX Z	Dining and	te)	sleeping quarters,	age			-			shack, etc.)	ture on property)	Proposed Structure	26		Length: 48'						Year Round	Seasonal	Use
·	1		loft of observation	] 	24/534	rec room		or cooking 8									e						□ None		3	□ 2		of bedrooms
			ition room			r		food prep fa											width:	Width:	None	☐ Compo	☐ Portat	□ Privy (	Sanita	□ (New)	☐ Munic	
	 		77					cilities)										10	7	361		<b>Compost Toilet</b>	Portable (w/service	Pit) or	ry (Exists)	(New) Sanitary Specify Type:	Municipal/City	Sewer/Sani Is on the
( )	( )	( )	10 >	(	į	( ) ( ) ( )	ĺ			( )			(			(	Dime						ice contract)	Vaultec	Specify T	Specify Ty		Sewer/Sanitary System Is on the property?
x )	X )	x )	× 25	× )	×	× 20°)	X )	× )	X }	× )	×	× )	X )	× -	× -	× )	Dimensions		Height:	Height:			(1)	Privy (Pit) or Vaulted (min 200 gallon)	Sanitary (Exists) Specify Type: holdy	/pe:		ystem rty?
			25			438											Square Footage		32	221	- Administrative and subsequent			allon) _	tent	[#]		
			Q,			10											are age				*Control of the last				11	Well	□ cíty	Water

FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described properly again, reasonable time for the purpose.

Owner(s): (If there are Multiple must sign or letter(s) of authorization must accompany this application)

Authorized Agent:

Address to send permit

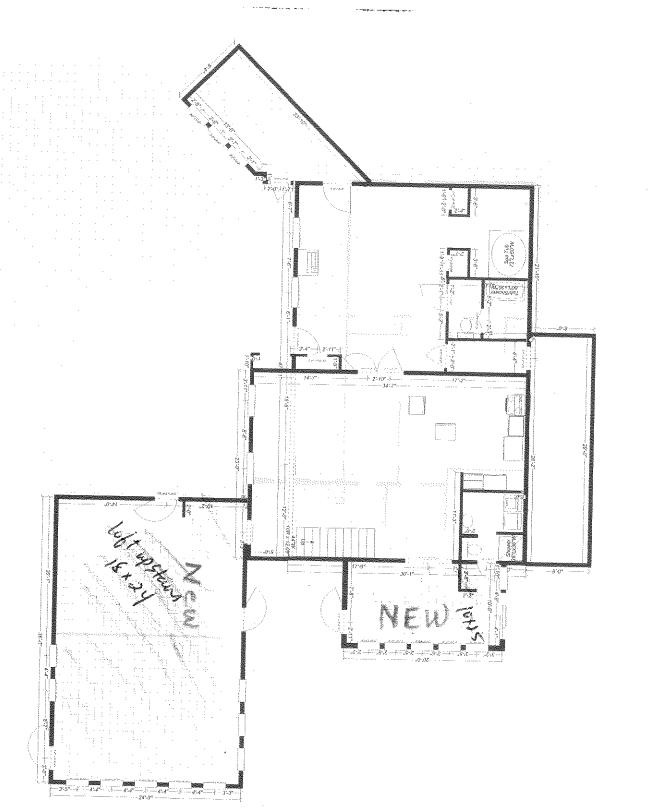
(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Date

Date

37

Please complete (1) - (7) above (prior to continuing)  (8) Setbacks: (measured to the closest point)  Description.  Description.	(1) Show Location of:  (2) Show / Indicate: (3) Show / Indicate: (4) Show: (5) Show: (6) Show: (7) Driveway and (7) Frontage Road (Name Frontage Road) (8) Show: (8) Show: (9) Show: (1) Lake; (1) River; (1) Stream/Creek; or (1) Drain field (DF); (1) Holding Tank (HT) and/or (1) Privy (P) (7) Show any (1): (1) Lake; (1) River; (1) Stream/Creek; or (1) Pond  See Attached  See Attached  See Attached
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Gary + Nancy Cholwek 11-1-15

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

, parties APPLICATION FOR PERMIT 3 3 5 THE CO

Permit #: Date: Refund: Amount Paid: 好别 13. 

INSTRUCTIONS: No permits will be issued until all fees are paid.
Checks are made payable to: Bayfield County Zoning Department.
DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN IS

□ Yes	□ Yes	reline :	Distance Structure is from Shoreline :	ke, Pond or Flowage	☐ Shoreland → ☐ Is Property/Land within 1000 feet of Lake, Pond or Flowage
Are Wetlands Present?	Is Property in Floodplain Zone?	reline : feet	Distance Structure is from Shoreline:	er, Stream (incl. Intermittent)  If yes—continue	☐ Is Property/Land within 300 feet of River, Stream (incl. Intermittent)  Creek or Landward side of Floodplain? If yes—continue—▶
			307U6J		Section (20), Township 7/ N, Range (37) W
),	Acreage C	Lot Size			٦
	n:	Subdivision	Lot(s) No. Block(s) No.	) CSM Vol & Page	$\sum_{1/4}$ $\sum_{1/4}$ $\sum_{1/4}$ Gov't Lot Lot(s)
s) <u>555</u>	/         Page(s) \SS	Volume 1		04-	LOCATION Legal Description: (Use Tax Statement)
erty Ownership)	Recorded Document: (i.e. Property Ownership)	Recorded D		PIN: (23 digits)	PROJECT
□ No	□ Yes □ No				
	Attached				
Written Authorization	Written A	State/Zip):	Agent Wailing Address (include City/State/Zip):		Authorized Agent: (Person Signing Application on behalf of Owner(s))
Phone:	Plumber Phone:	(	Plumber:	Contractor Phone:	Contractor:
	1	らみ大		WASINGURA)	フストマース
e.	Cell Phone:	: )	)	City/State/Zip:	Address of Property:
12/2/2007		<u>ک</u> آبار	54 Washburati	PO BOX 354	COUNTY /JULY
)		5489	City/State/Zip:	Mailing Address:	Owner's Name:
□ OTHER	🗆 в.о.д. 🗆 о	☐ SPECIAL USE	☐ CONDITIONAL USE ☐ SPEC	□ SANITARY □ PRIVY □	TYPE OF PERMIT REQUESTED->   🗆 LAND USE 🛘 SA
			onling Dept.	APPLICANDAY/IIBID CO. 2	O NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICAMBAYIGID CO. ZONING DEPL.

Proposed Construction:	Existing Structur					0000	トー・ファック		Value at Time of Completion * Include donated time & material
uction:	Existing Structure: (If permit being applied for is relevant to it)		Property	☐ Run a Business on	☐ Relocate (existing bldg)	. ☐ Conversion	☐ Addition/Alteration	New Construction	Project
	or is relevant to it)		☐ Foundation	☐ No Basement	☐ Basement	☐ 2-Story	☐ 1-Story + Loft	③ 1-Story	# of Stories and/or basement
Length: つ	Length;						Year Round	Seasonal	Use
0				None	П	3	2	□ <b>Ľ</b>	# of bedrooms
Width: SO Height:	Width: Height:	□ None	☐ Compost Toilet	Portable (w/service contract)	☐ Privy (Pit) or ☐ Vaulted (min 200 gallon)	☐ Sanitary (Exists) Specify Type: 1	(New) Sanitary Specify Type:	☐ Municipal/City	What Type of Sewer/Sanitary System Is on the property?
Height: 20				teritori, deli proprio della p	gallon)		₩ell	□ City	Water

Non-Shoreland

		The second secon	
	×	Other: (explain)	
	( × )	Conditional Use: (explain)	
	×	Special Use: (explain)	
	A Commence of the Commence of		Racid for Issiano
,	( x )	Accessory Building Addition/Alteration (specify)	,
3,500	(70 × 50)	Accessory Building (specify) <u>COかれたこのなくらいなみよら</u>	Wunicipal use
4	( x	Addition/Alteration (specify)	
And the second s	( x	Mobile Home (manufactured date)	
	( x	<b>Bunkhouse</b> w/ ( $\square$ sanitary, <u>or</u> $\square$ sleeping quarters, <u>or</u> $\square$ cooking & food prep facilities)	
The state of the s	×	with Attached Garage	@ Commercial Use
	×	with (2 <sup>nd</sup> ) Deck	
	X	with a Deck	
	×	with (2 <sup>nd</sup> ) Porch	
	×	with a Porch	Residential Use
	×	with Loft	
	×	Residence (i.e. cabin, hunting shack, etc.)	
	×	Principal Structure (first structure on property)	
Square Footage	Dimensions	Proposed Structure	Proposed Use

Secretarial Staff
Twe) acciare that this application is
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may be a result of Bayfield County
above described property at any yea Authorized Agent: Owner(s): (If there are Multiple Ó AILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES
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(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Attach

Copy of Tax Statement

If you recently purchased the property send your Recorded Deed

Address to send permit

		Hold For Fees:	Wit:	Hold For Affidavit:	-4444mmetra-enteresent ethomore-en-	Hold For TBA:		lold For Sanitary:
Date of Approval:	Date of				Halipping		ctor:	ignature of Inspe
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interest.	ERMIT TO	3 7 7 8	がまれ	がまれて		है रा		R R R R
-iispecuoii:	Date of Ne-Hispection	tached.)	(If No they need to be att	0	Attached?	d Conditions /	Condition(s):Town, Committee or Board Conditions Attached?	Condition(s):Towr
s Classification ( <b>V/H</b>	Lake		C			property	7.	TOR BY
<b>1</b>	□ Yes	Was Property Surveyed	<b>—</b>	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	2000 1000 1000 1000 1000 1000 1000 1000	EX.	Was Proposed Building Site Delineated Inspection Record:	Was Proposed B
TANA D INC	e#;	nes Represented b	□ Yes No Were Property Lines Represe		No	X \	Parcel Legally Created	Yes Was
□ Yes /		□ <b>Yes</b> Variance {	Mitigation Attache	- R			ling	Is Structure Non-Conforming Granted by Variance (B.O.A.)
uired □Yes \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	o Affidavit Required	d □ Yes No	Mitigation Required		(Deed of Record)(Fused/Contiguous Lot(s))		Is Parcel a Sub-Standard Lot	is Parcel a Su Is Parcel in Comn
			5		Permit Date:		OFIR R	Permit #:
110	sanitary pate:	# of beardonns:		Jenial:	Reason for Denial:	Jse Only)	Issuance Information (County Use Only) Permit Denied (Date):	Issuance Informa Permit Denied (Date):
In. Sode.		rain Tield (DH), Ho rain Tield (DH), Ho if Construction or quired To Enforce also require permi	NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begue For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling: All Municipalities are Required To Enforce The Uniform Dwelling: All Municipalities Are Required To Enforce The Uniform Dwelling: All Municipalities Are Required To Enforce The Uniform Dwelling: All Municipalities Are Required To Enforce The Uniform Dwelling: All Municipalities Are Required To Enforce The Uniform Dwelling: All Municipalities Are Required To Enforce The Uniform Dwelling: All Municipalities Are Required To Enforce The Uniform Dwelling: All Municipalities Are Required To Enforce The Uniform Dwelling: All Municipalities Are Required To Enforce The Uniform Dwelling: All Municipalities Are Required To Enforce The Uniform Dwelling: All Municipalities Are Required To Enforce The Uniform Dwelling: All Municipalities Are Required To Enforce The Uniform Dwelling: All Municipalities Are Required To Enforce The Uniform Dwelling: All Municipalities Are Required To Enforce The Uniform Dwelling: All Municipalities Are Required To Enforce The Uniform Dwelling: All Municipalities Are Required To Enforce The Uniform Dwelling: All Municipalities Are Required To Enforce The Uniform Dwelling: All Municipalities Are Required To Enforce The Uniform Dwelling: All Municipalities Are Required To Enforce The Uniform Dwelling: All Municipalities Are Required To Enforce The Uniform Dwelling: All Municipalities Are Required To Enforce The Uniform Dwelling: All Municipalities Are Required To Enforce The Uniform Dwelling: All Municipalities Are Required To Enforce The Uniform Dwelling: All Municipalities Are Required To Enforce The Uniform Dwelling: All Municipalities Are Required To Enforce The Uniform Dwelling: All Municipalities Are Required To Enforce The Uniform Dwelling: All Municipalities Are Required To Enforce The Uniform Dwelling: All Municipalities Are Required To Enforce The Uniform Dwel	_onstruction_ (1) Year from welling: ALL I :ity, State or F	ation(s) of New 5 ermits Expire One ie & Two Family Do al Town, Village, C	Il Land Use Poin Of New On The loc	NOTICE: A For The Constructio	(9)
R + 9	om which the setback must be re 500 feet of the proposed site o	ack, the boundary line from a known corner within	the minimum required setb:	ty (30) feet from i	the owner's expense.  (0) feet but less than thir  er, or verifiable by the D	nsed surveyor at 1 more than ten (1) sly surveyed corns	ther previously surveyed corner or marked by a licensed surveyor at the owner's expense.  rior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback in previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proporties by a licensed surveyor at the owner's expense.	her previously surveye for to the placement of the previously surveyed arked by a licensed sur
previously surveyed corner to the	ured must be visible from one	he setback must be meas	boundary line from which the	Feet	et of the minimum requ	ng)	or to the placement or construction of a structure within ten (10) feet of the minimum required so	etback to Privy
Feet			Setback to Well	Feet	250	nk	: Tank or Holding Tank Field	Setback to <b>Septic Tanl</b> Setback to <b>Drain Field</b>
		odplain	Elevation of Floodplain	Feet	0.47		East Lot Line	etback from the East Lot Line
Feet No.		Vetland	Setback from Wetland	Feet	000		South Lot Line	Setback from the <b>South</b> Lot Line
Feet		or Bluff	Setback from th	Feet	790		North Lot Line	etback from the
Feet	high-water mark) Creek		Setback from the Lake ( Setback from the River,	Feet		ed Road of-Way	Established Right-of-Way	Setback from the Setback from the I
Measurement		Description		ment	Measurement		Description	
					losest point)	red to the c	Setbacks: (measured to the closest point)	(8)
by the Planning & Zoning Dent		Changes in plans must be approved	<u> </u>		inuing)	(prior to cont	complete (1) - (7) above (prior to continuing)	Please comple
						JI AO	SEE A	(2)
	(HT) and/or (*) Privy (P)	Road) (*) Holding Tank	(*) Driveway and (*) Frontage Road (Name Frontage Road) All Existing Structures on your Property (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (*) Wetlands; or (*) Slopes over 20%	rontage Roa on your Pro c Tank (ST); Stream/Cre opes over 20	(*) Driveway and (*) F All Existing Structures (*) Well (W); (*) Seption (*) Lake; (*) River; (*) (*) Wetlands; or (*) Sl		Show Location of (*): Show: Show: Show: Show: Show any (*): Show any (*):	(5) (6) (7)
			e applying for)	what you are	Draw or Sketch your Property (regardless of what you are applying for) ow Location of: Proposed Construction	your Proper Prope	below. Draw or Sketch  1) Show Location of:	(1)

field County, WI



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